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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	-	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

## Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	1: Identify Yourself					
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name					
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.	Pirst name  R  Middle name  Allen  Last name and Suffix (Sr., Jr., II, III)	- - -	Catherine First name  A Middle name  Allen Last name and Suffix (Sr., Jr., II, III)		
2.	All other names you have used in the last 8 years Include your married or maiden names.					
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2732		xxx-xx-7582		

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Debtor 1 David R Allen
Debtor 2 Catherine A Allen

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)	■ I have not used any business name or EINs.  Business name(s)			
		EINs	EINs			
5.	5. Where you live 2S271 Route 59 Warrenville, IL 60555		If Debtor 2 lives at a different address:			
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		DuPage County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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	otor 1 otor 2	Catherine A Allen					Case number (if known)			
Par	rt 2:	Tell the Court About \	Your Bank	ruptcy Ca	se					
7.	Bank	chapter of the ruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choo	sing to file under	■ Chap	Chapter 7						
			☐ Chapt	ter 11						
			☐ Chapt	ter 12						
			☐ Chapt	ter 13						
8.	How	you will pay the fee	abo ord a p	out how yo er. If your re-printed	u may pay. Typical attorney is submitti address.	y, if you are paying the fee yong your payment on your be	eck with the clerk's office in your local court for more details yourself, you may pay with cash, cashier's check, or money half, your attorney may pay with a credit card or check with tion, sign and attach the Application for Individuals to Pay			
					e in Installments (O		ion, sign and altaon the representation for marriadale to ray			
			but app	is not requolies to you	uired to, waive your or family size and yo	fee, and may do so only if you are unable to pay the fee	on only if you are filing for Chapter 7. By law, a judge may, your income is less than 150% of the official poverty line that in installments). If you choose this option, you must fill out ficial Form 103B) and file it with your petition.			
	9. Have you filed for bankruptcy within the									
	last 8 years?									
				District		When	Case number			
				District		When	Case number			
				District		When	Case number			
10.		ny bankruptcy s pending or being	■ No							
	filed not fi you,	by a spouse who is ling this case with or by a business er, or by an	☐ Yes.							
				Debtor			Relationship to you			
				District		When	Case number, if known			
				Debtor			Relationship to you			
				District		When	Case number, if known			
11.		ou rent your ence?	■ No.	Go to li	ne 12.					
	iesiu	611 <b>0</b> 6 :	☐ Yes.	Has yo	ur landlord obtaine	d an eviction judgment agair	nst you and do you want to stay in your residence?			
					No. Go to line 12.					

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

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	tor 1 David R Allen tor 2 Catherine A Allen		Docum	Case number (if known)				
Part	Report About Any Bu	sinesses	You Own as a Sole Proprie	etor				
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.					
		☐ Yes.	Name and location of bu	siness				
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any					
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code					
	it to this petition.		Check the appropriate box to describe your business:  Health Care Business (as defined in 11 U.S.C. § 101(27A))					
			☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))					
			Stockbroker (as defined in 11 U.S.C. § 101(518))  Stockbroker (as defined in 11 U.S.C. § 101(53A))					
				er (as defined in 11 U.S.C. § 101(6))				
			☐ None of the abov					
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).					
	For a definition of small	■ No.	I am not filing under Cha	pter 11.				
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter Code.	11, but I am NOT a small business debtor according to the definition in the Bankruptcy				
		☐ Yes.	I am filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.				
Part	4: Report if You Own or	Have Any	· Hazardous Property or Ar	ny Property That Needs Immediate Attention				
14.	Do you own or have any property that poses or is	■ No.						
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?					
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?					
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?					
	-			Number, Street, City, State & Zip Code				

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Debtor 1 David R Allen
Catherine A Allen
Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 17-30722 Doc 1 Filed 10/13/17 Entered 10/13/17 12:14:18 Desc Main Document Page 6 of 62

	otor 2 Catherine A Allen			Case	number (if known)			
Par	t 6: Answer These Quest	ons for Re	porting Purposes					
16.	What kind of debts do you have?		Are your debts primarily consuluindividual primarily for a personal,		re defined in 11 U.S.C. § 101(8) as "incurred by an			
			☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily busine money for a business or investme	ess debts? Business debts are nt or through the operation of the	debts that you incurred to obtain ne business or investment.			
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you owe th	nat are not consumer debts or b	ousiness debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapter 7. G	o to line 18.				
Do you estimate that after any exempt property is excluded and administrative expenses		<b>—</b> 163.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
19.	How much do you estimate your assets to be worth?	□ \$100,0	0,000 1 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	n □ \$10,000,000,001 - \$50 billion			
20.	How much do you estimate your liabilities to be?	<b>\$100,0</b>	0,000 11 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	n			
Par	t 7: Sign Below							
For	you	I have exa	mined this petition, and I declare	under penalty of perjury that the	e information provided is true and correct.			
					ligible, under Chapter 7, 11,12, or 13 of title 11, nd I choose to proceed under Chapter 7.			
			ney represents me and I did not pa I have obtained and read the not		o is not an attorney to help me fill out this 2(b).			
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankruptcy and 3571.	y case can result in fines up to \$2		oney or property by fraud in connection with a to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		/s/ David		/s/ Catheri Catherine				
			of Debtor 1	Signature of				
		Executed	October 13, 2017  MM / DD / YYYY	Executed on	October 13, 2017 MM / DD / YYYYY			

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	David R Allen	2000	go : 0. 0_	
Debtor 2	Catherine A Allen		Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Joshua	D. Greene	Date	October 13, 2017
Signature of	Attorney for Debtor		MM / DD / YYYY
Joshua D.	Greene		
Printed name			
Springer E	Brown, LLC		
Firm name			
300 S. Cou	ınty Farm Road		
Suite I			
Wheaton,	IL 60187		
	City, State & ZIP Code		
Contact phone	630-510-0000	Email address	www.springerbrown.com
6292914			
Bar number & S	tate		

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Debtor 2 Catherine A Allen Case number (if known) **Answer These Questions for Reporting Purposes** 16. What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. □ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded and administrative expenses No. are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1,000-5,000 **25.001-50.000** 1-49 you estimate that you □ 5001-10,000 □ 50,001-100,000 □ 50-99 owe? 10,001-25,000 ☐ More than 100,000 100-199 200-999 19. How much do you □ \$0 - \$50,000 ☐ \$1,000,001 - \$10 million ☐ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million ☐ \$1,000,000,001 - \$10 billion be worth? □ \$100,001 - \$500,000 □ \$50,000,001 - \$100 million ☐ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ☐ More than \$50 billion \$500,001 - \$1 million How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million ☐ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? ☐ \$50.000.001 - \$100 million □ \$10,000,000,001 - \$50 billion \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion ☐ \$500.001 - \$1 million Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. David R Allen Catherine A Allen Signature of Debtor 1 Signature of Debtor 2 10-5-17 Executed on 10 05 2017 Executed on MM / DD / YYYY MM / DD / YYYY

Debtor 1

Case 17-30722 Doc 1 Filed 10/13/17 Entered 10/13/17 12:14:18 Desc Main Page 9 of 62 Document David R Allen Debtor 1 Debtor 2 Catherine A Allen Case number (if known) For your attorney, if you are I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed represented by one under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect. If you are not represented by an attorney, you do not need to file this page. Date Signature of Attorney for Debtor Joshua D. Greene Printed name Springer Brown, LLC 300 S. County Farm Road Suite I Wheaton, IL 60187

Email address

Number, Street, City, State & ZIP Code

Contact phone 630-510-0000

**6292914**Bar number & State

www.springerbrown.com

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Fill in this inforr	nation to identify your o	ase:			
Debtor 1	David R Allen				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Catherine A Allen	Middle Name	Last Name		
(Spoose ii, liilig)	rust Name	Wildle Name	Lastivanie		
United States Ba	inkruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case number					
(if known)					☐ Check if this is an
					amended filing
Official Form	n 106Daa				•
Official Forr			D 14 1 0		
Declarat	ion About a	n Individual	Debtor's Sc	hedules	12/15
	8 U.S.C. §§ 152, 1341, 1 n Below	519, and 3571.	,	. <b>.</b>	·
Did you pa	y or agree to pay some	one who is NOT an attor	ney to help you fill out b	ankruptcy forms?	
No No					
☐ Yes.	Name of person				uptcy Petition Preparer's Notice, and Signature (Official Form 119)
		that I have read the sum	mary and schedules filed	d with this declaration	and
that they ar	re true and correct.		/ a	11 -	1 110.
x Do	- ROW		x Ctt	Therese l	2 allen
	R Allen		Catherine		
Signatu	ire of Debtor 1		Signature of	Debtor 2	1
Date _	10/05/201	7	Date	1015/1	(

Document Page 11 of 62 Debtor 1 David R Allen Debtor 2 Catherine A Allen Case number (if known) 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? 120 No П Yes. Fill in the details. Name of site Governmental unit Date of notice Environmental law, if you Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 25. Have you notified any governmental unit of any release of hazardous material? No П Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Case Title Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Did David R Allen Catherine A Allen Signature of Debtor 1 Signature of Debtor 2 Date

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 17-30722

Doc 1

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Debtor 1 David R Allen Debtor 2 Catherine A Allen	Case number (if known)
, securing debt:	
Part 2: List Your Unexpired Personal Property Leases or any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Un you may assume an unexpired personal property lease if the state of the state lease if the state lease is the state of the state lease.	in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill lexpired leases are leases that are still in effect; the lease period has not yet ended. the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No.
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated m property that is subject to an unexpired lease.	y intention about any property of my estate that secures a debt and any personal
X David R Allen	X athero a aller Catherine A Allen
Signature of Debtor 1	Signature of Debtor 2
Date 10 - 05 - 2017	Date 1015/17

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Debtor 2 Cat

David R Allen Catherine A Allen

Case number (if known)

	·				Hanka i	HIN ANALY	Same a 157	
				Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unemployment compensation			\$	0.00	\$	0.00	
	Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:	received was a benef	fit under					
	For you \$	0.	00					
	For your spouse \$	0.	00					
	Pension or retirement income. Do not include any ambenefit under the Social Security Act.	cunt received that wa	s a	\$	0.00	\$	0.00	
	Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hur domestic terrorism. If necessary, list other sources on a total below.	ecurity Act or paymer nanity, or international	nts I or					
	•			\$	0.00	\$	0.00	
	MALE PARTY CONTRACTOR			\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	Calculate your total current monthly income. Add line each column. Then add the total for Column A to the total for Column A total for Co		\$	0.00	+ \$_	3,678.82	= \$	3,678.82
			L		J L			current monthly
Part	2: Determine Whether the Means Test Applies t	o You					incon	ie
12.	Calculate your current monthly income for the year	. Follow these steps:						
	12a. Copy your total current monthly income from line	•		Сор	y line 11	here=>	\$	3,678.82
		***************************************	*************					
	Multiply by 12 (the number of months in a year)						X	12
	12b. The result is your annual income for this part of th	e form				121	b. \$	44,145.84
13.	Calculate the median family income that applies to	you. Follow these ste	ps:				<u></u>	
	Fill in the state in which you live.	IL						
	The mane state in which you live.							
	Fill in the number of people in your household.	2						
	Fill in the median family income for your state and size	of household.				13	. \$	66,487.00
:	To find a list of applicable median income amounts, go for this form. This list may also be available at the bank		specified	in the separ	ate instru	ıctions		
14.	How do the lines compare?			-				
-	14a. Line 12b is less than or equal to line 13. C Go to Part 3.	n the top of page 1, c	heck box	(1, There is	no presų	mption of abu	se.	
	14b.  Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box 2	2, The pi	resumption o	f abuse i	s determined l	by Form 1	122A-2.
Par	3: Sign Below			*				
	By signing here, I declare under penalty of perjury	that the information of	on this st	atement and	l in any a	tachments is	true and	correct.
	x Dadra	X		oth	ren	o a	al	les_
	David R Allen Signature of Debtor 1			<b>ine A Aller</b> re of Debtor				
	Date 10/05/2017 MM/DD/YYYY	Date	MM / DI	1015	117			
	If you checked line 14a, do NOT fill out or file For		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	If you checked line 14b, fill out Form 122A-2 and							

# Case 17-30722 Doc 1 Filed 10/13/17 Entered 10/13/17 12:14:18 Desc Main Document Page 14 of 62

# **United States Bankruptcy Court Northern District of Illinois**

In re	Catherine A Allen		Case No.		
		Debtor(s)	Chapter	7	
	VER	IFICATION OF CREDITOR MA	ATRIX		
		Number of O	Creditors:		4
			annuman , annuma		
	The above-named Debtor(s) h (our) knowledge.	ereby verifies that the list of credito	ors is true and	correct to the best of	my
Date:	10/5/2017	Dail A Cl	<u></u>		
Date:	1015117	David R Allen Signature of Debtor  Atherese	( ( )	lles	
		Catherine A Allen	<u> </u>		
		Signature of Debtor			

		DOCUME	III Paue 15 01 07	
Fill in this infor	mation to identify your	case:		
Debtor 1	David R Allen			
	First Name	Middle Name	Last Name	
Debtor 2	Catherine A Aller	1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(·· ···· <del>·· ·</del> ····)				-

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			issets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	280,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	300,855.58
	1c. Copy line 63, Total of all property on Schedule A/B	\$	580,855.5
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	228,009.40
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	85,699.88
	Your total liabilities	\$	313,709.28
Par	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	4,767.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,688.8
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
	■ Yes		

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1 David R Allen

Debtor 2 Catherine A Allen

Document Page 16 of 62

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,678.82

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	l claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	C	Case 17-3	30722	Doc 1		10/13/17 cument	Entered 10/13/17 Page 17 of 62	7 12:14:18	Des	sc Ma	ain
ŦIII	in this info	ormation to i	dentify y	your case and							
Deb	otor 1	David First Nam	R Aller		ddle Name		Last Name				
	otor 2 use, if filing)	Cathe First Nam	rine A		ddle Name		Last Name				
Uni	ted States E	Bankruptcy C	ourt for t	he: NORTHE	ERN DIST	RICT OF ILLIN	NOIS				
Cas	se number						-				theck if this is an mended filing
_		orm 10		operty							12/15
hink nfor nsv	it fits best. mation. If mover every qu	Be as comple ore space is n estion.	ete and a leeded, a	ccurate as poss ttach a separate	ible. If two sheet to t	married people his form. On the	in asset fits in more than one of a are filing together, both are ended to any additional pages, one or Have an Interest In	qually responsil	ble for su	pplying	correct
	_		jai or equ	litable interest li	n any resid	lence, bullaing,	land, or similar property?				
_	No. Go to P										
_	• Yes. where	e is the propert	y?								
1.1					What	is the property	? Check all that apply				
	2S271 R	ss, if available, or	other desc	ription	_ =	Single-family h		Do not deduct so the amount of ar			
		-,				Duplex or multi-	or cooperative	Creditors Who F			
	Warrenv	ville	IL State	60555-0000 ZIP Code	_ _ _	Land	or mobile home	Current value of entire property	?		nt value of the on you own?
	Oity		State	ZIF Code		Timeshare Other		Describe the na (such as fee sir	ature of yo		nership interest the entireties, or
					Who		in the property? Check one	a life estate), if Joint tenant			
	DuPage				_ □	Debtor 2 only					
	County					Debtor 1 and I	•	☐ Check if th	is is com	munity	property
							the debtors and another bu wish to add about this item on number:	(see instruction, such as local	ons)		

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$280,000.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

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Cars, vans			ase number (if known)	
□ No	s, trucks, tractors, sport utility ve	hicles, motorcycles		
Yes				
3.1 Make:	Chevrolet	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
Model:	2500HD Silverado	Debtor 1 only		aims Secured by Property.
Year:	2004	Debtor 2 only	Current value of the	Current value of the
Approx	timate mileage: 182600	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other i	nformation:	☐ At least one of the debtors and another		
		Check if this is community property (see instructions)	\$5,300.00	\$5,300.0
	Ford		Do not deduct secured	claims or exemptions. Put
3.2 Make: Model:	F	Who has an interest in the property? Check one  Debtor 1 only		red claims on Schedule D: aims Secured by Property.
Year:	2007	Debtor 2 only	Creditors willo have Ci	aims Secured by Property.
	ximate mileage: 81000	■ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	nformation:	■ At least one of the debtors and another	entile property:	portion you own:
		At least one of the deptors and another		
		Check if this is community property (see instructions)	\$4,500.00	\$4,500.0
.3 Make:	Chevrolet	Who has an interest in the property? Check one		claims or exemptions. Put
Model:	Equinox	Debtor 1 only		red claims on Schedule D: aims Secured by Property.
Year:	2012	Debtor 2 only	Current value of the	Current value of the
Approx	timate mileage: 180000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other i	nformation:	☐ At least one of the debtors and another		
Vehic	ele owned jointly with son	☐ Check if this is community property (see instructions)	\$4,500.00	\$4,500.0
		d other recreational vehicles, other vehicles, an		
Examples: ■ No	boats, trailers, filotors, personar wa	tercraft, fishing vessels, snowmobiles, motorcycle a	ccessories	
Examples:  No Yes  Add the c	dollar value of the portion you ow	rn for all of your entries from Part 2, including arthat number here	ny entries for	\$14,300.00
■ No □ Yes  Add the conpages you	dollar value of the portion you ow	rn for all of your entries from Part 2, including ar that number here	ny entries for	\$14,300.00
■ No □ Yes  Add the copages yourt 3: Descooyou own	dollar value of the portion you ow u have attached for Part 2. Write ribe Your Personal and Household It or have any legal or equitable in	rn for all of your entries from Part 2, including ar that number here	ny entries for	Current value of the portion you own?
■ No □ Yes  Add the copages your art 3: Descopyou own  Household Examples □ No	dollar value of the portion you ow u have attached for Part 2. Write ribe Your Personal and Household It or have any legal or equitable in d goods and furnishings	en for all of your entries from Part 2, including ar that number hereems ems terest in any of the following items?	ny entries for	Current value of the portion you own? Do not deduct secured
■ No □ Yes  Add the copages yourt 3: Descopyou own  Household Examples □ No	dollar value of the portion you ow u have attached for Part 2. Write ribe Your Personal and Household It or have any legal or equitable in d goods and furnishings	en for all of your entries from Part 2, including ar that number hereems ems terest in any of the following items?	ny entries for	Current value of the portion you own? Do not deduct secured
Examples:  No  Yes  Add the copages your art 3: Description you own  Household Examples  No	dollar value of the portion you ow u have attached for Part 2. Write ribe Your Personal and Household It or have any legal or equitable in d goods and furnishings: Major appliances, furniture, linens rescribe	en for all of your entries from Part 2, including ar that number hereems ems terest in any of the following items?	e, 1	Current value of the portion you own? Do not deduct secured

Official Form 106A/B Schedule A/B: Property

page 2

Case 17-30722 Doc 1 Filed 10/13/17 Entered 10/13/17 12:14:18 Desc Main Document Page 19 of 62 David R Allen Debtor 1 Debtor 2 **Catherine A Allen** Case number (if known) 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe..... **Wearing Apparel** \$1,000.00 Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver Yes. Describe..... \$1,500.00 Jewelry 13 Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$7,500.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

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	ebtor 1 ebtor 2	David R Allen Catherine A Al	llen		Case number (if known)	
	Exam				counts; certificates of deposit; shares in credit unions, brokerage houses, as with the same institution, list each.	and other similar
	□ No ■ Yes.				Institution name:	
			17.1.	Checking	MB Financial	\$2,290.00
			17.2.	Savings	MB Financial	\$1,703.00
			17.3.	Checking	Chase Bank	\$3.37
			17.4.	Checking	MB Financial	\$32.21
18.		s, mutual funds, or ples: Bond funds, in			rokerage firms, money market accounts	
	_			Institution or issue	r name:	
19.		ublicly traded stoc venture	k and	interests in incorp	oorated and unincorporated businesses, including an interest in an L	LC, partnership, and
	_	Give specific inform		about themne of entity:	% of ownership:	
20.	Negot	<i>tiable instrument</i> s in	clude p	ersonal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	■ No □ Yes.	Give specific inform	nation a	about them		
				uer name:		
		ment or pension ac ples: Interests in IR/			403(b), thrift savings accounts, or other pension or profit-sharing plans	
	Yes.	List each account s		ely. of account:	Institution name:	
			IRA		Husband IRA: Edward Jones	\$92,804.00
			IRA		Wife IRA: Edward Jones	\$56,750.00
			401(k	x)	Wife 401(k): Country Financial	\$29,005.00
			401(k	x)	Fidelity	\$74,641.00
			401(k	x)	Diversified Investments	\$6,000.00
22.	Your s		deposit	s you have made s	to that you may continue service or use from a company , public utilities (electric, gas, water), telecommunications companies, or o	thers

No

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### 31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

□ No

Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund

value:

**Prudential Cash Value Policy: Face** Value \$150,000

**Catherine Allen** 

\$15,358.00

**Prudential Cash Value Policy: Face** 

Valu \$50,000

**Catherine Allen** 

\$469.00

Case 17-30722 Doc 1 Filed 10/13/17 Entered 10/13/17 12:14:18 Desc Main Document Page 22 of 62 David R Allen Debtor 1 Debtor 2 **Catherine A Allen** Case number (if known) 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$279.055.58 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No

☐ Yes. Give specific information.......

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

\$0.00

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David R Allen Debtor 1 Debtor 2 Catherine A Allen Case number (if known) Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$280,000.00 56. Part 2: Total vehicles, line 5 \$14,300.00 Part 3: Total personal and household items, line 15 57. \$7,500.00 Part 4: Total financial assets, line 36 58. \$279,055.58 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

\$300,855.58

Copy personal property total

63. Total of all property on Schedule A/B. Add line 55 + line 62

Part 7: Total other property not listed, line 54

Total personal property. Add lines 56 through 61...

\$580,855.58

\$300,855.58

		I A A A I II I I I	111111111111111111111111111111111111	
Fill in this infor	mation to identify your	case:		
Debtor 1	David R Allen			
	First Name	Middle Name	Last Name	
Debtor 2	Catherine A Aller	1		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is a amended filing

### Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt
---

1.	Which set of exemptions are you claiming? Che	ck one only, even if your spouse is filing with you
----	---	---

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own  Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Schedule A/B	0110	on only one box for each exemption.	
2S271 Route 59 Warrenville, IL 60555 DuPage County	\$280,000.00		\$30,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2004 Chevrolet 2500HD Silverado 182600 miles	\$5,300.00		\$2,400.00	735 ILCS 5/12-1001(c)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2007 Ford Fusion 81000 miles	\$4,500.00		\$2,400.00	735 ILCS 5/12-1001(c)
			100% of fair market value, up to any applicable statutory limit	
3 bedroom sets, 2 couches, recliner, ottoman, coffee table, 1 loveseat, 1	\$5,000.00		\$5,000.00	735 ILCS 5/12-1001(b)
dining room set, 3 televisions, riding lawn mower, snowblower, washer/dryer Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Ellio Holli Gorioddio 77B. G.:				
Wearing Apparel Line from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(a)
Zino nom Gonodalo / v.b.			100% of fair market value, up to any applicable statutory limit	

Document Page 25 of 62 David R Allen Debtor 1 Catherine A Allen Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B **Checking: MB Financial** 735 ILCS 5/12-1001(b) \$2,290.00 \$2,290.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: MB Financial 735 ILCS 5/12-1001(b) \$1,703.00 \$710.00 Line from Schedule A/B: 17.2 П 100% of fair market value, up to any applicable statutory limit IRA: Husband IRA: Edward Jones 735 ILCS 5/12-1006 \$92.804.00 \$92,804.00 Line from Schedule A/B: 21.1 П 100% of fair market value, up to any applicable statutory limit IRA: Wife IRA: Edward Jones 735 ILCS 5/12-1006 \$56,750.00 \$56,750.00 Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 401(k): Wife 401(k): Country Financial 735 ILCS 5/12-1006 \$29,005.00 \$29,005.00 Line from Schedule A/B: 21.3 100% of fair market value, up to any applicable statutory limit 401(k): Fidelity 735 ILCS 5/12-1006 \$74,641.00 \$74,641.00 Line from Schedule A/B: 21.4 100% of fair market value, up to any applicable statutory limit 401(k): Diversified Investments 735 ILCS 5/12-1006 \$6,000.00 \$6,000.00 Line from Schedule A/B: 21.5 100% of fair market value, up to any applicable statutory limit **Prudential Cash Value Policy: Face** 735 ILCS 5/12-1001(f) \$15,358.00 \$15,358.00 Value \$150,000 **Beneficiary: Catherine Allen** 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit **Prudential Cash Value Policy: Face** 735 ILCS 5/12-1001(f) \$469.00 \$469.00 Valu \$50,000 **Beneficiary: Catherine Allen** 100% of fair market value, up to Line from Schedule A/B: 31.2 any applicable statutory limit

3.	e you claiming a homestead exemption of more than \$160,375? bject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
	No
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
	□ No

П

Yes

		Document Pa	age 26	of 62			
Fill in this information	to identify you	r case:					
Debtor 1 Day	id R Allen						
	Name	Middle Name Las	t Name		-		
Debtor 2 Cat	herine A Alle	en					
(Spouse if, filing) First I	Name	Middle Name Las	t Name		-		
United States Bankruptc	v Court for the:	NORTHERN DISTRICT OF ILLINOI	S				
	,	-					
Case number							
(if known)					_	if this is an	
					amend	led filing	
Official Form 106	;D						
		What Have Claims Ca		d by Duanaut			
Schedule D: C	reditors	Who Have Claims Se	cured	a by Propert	<u>y                                    </u>	12/15	
Be as complete and accura	ite as possible. I	f two married people are filing together, bo	oth are eq	ually responsible for su	upplying correct informa	tion. If more space	
is needed, copy the Additionumber (if known).	onal Page, fill it o	out, number the entries, and attach it to thi	s form. O	n the top of any additio	nal pages, write your na	me and case	
Do any creditors have classes	aims socured by	Wour proporty?					
_ `	_		alulaa V				
_		nis form to the court with your other sche	auies. Yo	ou nave nothing else t	o report on this form.		
Yes. Fill in all of the	ne information b	pelow.					
Part 1: List All Secur	red Claims						
2. List all secured claims.	If a creditor has n	nore than one secured claim, list the creditor	separately	Column A	Column B	Column C	
for each claim. If more than	one creditor has	a particular claim, list the other creditors in P		Amount of claim	Value of collateral	Unsecured	
much as possible, list the cla	aims in aipnabetic	cal order according to the creditor's name.		Do not deduct the value of collateral.	that supports this claim	portion If any	
JP Morgan Chas	se Bank			\$00.000.40	<b>*</b> 000 000 00	<b>*</b> 0.00	
NA		Describe the property that secures the cl	aim:	\$38,808.40	\$280,000.00	\$0.00	
Creditor's Name		2S271 Route 59 Warrenville, IL					
		60555 DuPage County					
120 S. LaSalle S	<b>:</b>	As of the date you file, the claim is: Check	all that				
Chicago, IL 606		apply.  Contingent					
Number, Street, City, State		☐ Unliquidated					
riambor, Groot, Gry, Gra	to a zip oodo	☐ Disputed					
Who owes the debt? Che	eck one.	Nature of lien. Check all that apply.					
Debtor 1 only		☐ An agreement you made (such as mortg	age or sec	cured			
Debtor 2 only		car loan)	J				
■ Debtor 1 and Debtor 2 o	nly	☐ Statutory lien (such as tax lien, mechanic	c's lien)				
☐ At least one of the debto	rs and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim rela	tes to a	☐ Other (including a right to offset)					
community debt							
Date debt was incurred		Last 4 digits of account number	5444				
		-					
2.2 State Farm Bank	k	Describe the property that secures the cl	aim:	\$7,686.00	\$4,500.00	\$3,186.00	
Creditor's Name		2012 Chevrolet Equinox 180000		<u> </u>	Ψ 1,000.00	40,100.00	
		miles					
		Vehicle owned jointly with son					
2702 Ireland Gro	ove Road	As of the date you file, the claim is: Check apply.	all that				
Bloomington, IL	. 61709	Contingent					
Number, Street, City, Sta	te & Zip Code	☐ Unliquidated					
		☐ Disputed					
Who owes the debt? Che	eck one.	Nature of lien. Check all that apply.					
Debtor 1 only		■ An agreement you made (such as mortg	age or sec	cured			
Debtor 2 only		car loan)					
Debtor 1 and Debtor 2 o	nly	Statutory lien (such as tax lien, mechanic	c's lien)				
At least one of the debto	rs and another	☐ Judgment lien from a lawsuit					
☐ Check if this claim rela community debt	tes to a	Other (including a right to offset)					

Official Form 106D

Date debt was incurred \_\_\_\_\_ Last 4 digits of account number \_\_\_\_\_1144

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Debtor 1 David R Allen				Case number (if know)				
	First Name	Middle Name	Last Name					
Debtor 2	Catherine A Aller	า						
	First Name	Middle Name	Last Name					
	lls Fargo	Describe	e the property that secures the o	:laim:	\$181,515.00	\$280,000.00	\$0.00	
Cred	itor's Name	-	Route 59 Warrenville, IL DuPage County					
	Box 14411 s Moines, IA 50306	apply.	e date you file, the claim is: Chec	k all that				
Numl	ber, Street, City, State & Zip (							
	s the debt? Check one	☐ Dispu						
☐ Debtor ☐ Debtor	•	■ An aç car l	greement you made (such as mort	gage or seci	ured			
Debtor	1 and Debtor 2 only	☐ Statu	☐ Statutory lien (such as tax lien, mechanic's lien)					
☐ At least	t one of the debtors and a	another 🗖 Judgi	ment lien from a lawsuit					
	if this claim relates to a nunity debt	a Other	r (including a right to offset)					
Date debt	was incurred 1/200	<u>1</u> L	ast 4 digits of account number	5412				
Add the	dollar value of your en	tries in Column A c	on this page. Write that number I	here:	\$228,009.	40		
	the last page of your fo at number here:	orm, add the dollar	value totals from all pages.		\$228,009.	40		

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

	000 17 00722 00	Document	Page 28 of 62	10 Best Main
Fill in this info	ormation to identify your cas			
Debtor 1	David R Allen			
	First Name	Middle Name	Last Name	
Debtor 2	Catherine A Allen			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States I	Bankruptcy Court for the: N	ORTHERN DISTRICT OF I	LLINOIS	
Case number (if known)				☐ Check if this is an amended filing
Official Fo	rm 106E/F			
	E/F: Creditors Who	have Unsecured	d Claims	12/15
Schedule G: Exe Schedule D: Cre left. Attach the C	cutory Contracts and Unexpired ditors Who Have Claims Secure	l Leases (Official Form 106G). d by Property. If more space i	o list executory contracts on Schedule A/B: Po Do not include any creditors with partially so s needed, copy the Part you need, fill it out, n eport in a Part, do not file that Part. On the to	ecured claims that are listed in number the entries in the boxes on the
Part 1: List	All of Your PRIORITY Unse	cured Claims		
1. Do any cred	litors have priority unsecured cl	aims against you?		
No. Go to	Part 2.			
☐ Yes.				
Part 2: List	All of Your NONPRIORITY L	Insecured Claims		
3. Do any cred	litors have nonpriority unsecure	ed claims against you?		
☐ No. You	have nothing to report in this part.	Submit this form to the court wit	th your other schedules.	
Yes.				
unsecured c	laim, list the creditor separately for	each claim. For each claim liste	the creditor who holds each claim. If a creditored, identify what type of claim it is. Do not list clain have more than three nonpriority unsecured claim.	ims already included in Part 1. If more
				Total claim
4.1 Adva	nced Dermatology	Last 4 digits of ac	ccount number	\$173.05
Nonprio	rity Creditor's Name E. <b>Wilson St. #190</b>	When was the de	bt incurred?	
	r Street City State Zlp Code	As of the date you	u file, the claim is: Check all that apply	
Who in	curred the debt? Check one.			
Deb	tor 1 only	☐ Contingent		
☐ Deb	tor 2 only	☐ Unliquidated		
☐ Deb	tor 1 and Debtor 2 only	☐ Disputed		
☐ At le	east one of the debtors and anothe	' <u></u>	ORITY unsecured claim:	
	ck if this claim is for a commur			
debt Is the c	laim subject to offset?	Obligations aris	sing out of a separation agreement or divorce that laims	at you did not
■ No			on or profit-sharing plans, and other similar debts	3
□ Yes		Other. Specify		
00		— Other, Specify		

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Debtor 1 Debtor 2	David R Allen Catherine A Allen	Case number (if know)	
4.2	Advocate Medical Cardiology	Last 4 digits of account number	\$197.99
	Nonpriority Creditor's Name 1901 S. Meyers Rd Suite 350 Villa Park, IL 60181	When was the debt incurred?	<b>V</b> 2 22
_	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed  Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical	
	Chase Visa Nonpriority Creditor's Name	Last 4 digits of account number 5542	\$27,782.41
	P.O. 15123 Wilmington, DE 19850	When was the debt incurred?	
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit Card	
	Chase Visa Nonpriority Creditor's Name	Last 4 digits of account number 6525	\$30,281.60
	P.O. 15123	When was the debt incurred?	
	Wilmington, DE 19850  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date year me, the stain for encountries apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	□ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Credit card	

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Debtor 1 David R Allen

Deb	tor 2 Catherine A Allen	Case number (if know)				
4.5	Discover	Last 4 digits of account number 1516	\$13,083.57			
	Nonpriority Creditor's Name P.O. Box 6103 Carol Stream, IL 60197-6103	When was the debt incurred?				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
		☐ Student loans				
	☐ Check if this claim is for a community debt  Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card				
4.6	Edwards Elmhurst	Last 4 digits of account number	\$486.15			
	Nonpriority Creditor's Name					
	1804 N Naper Blvd Naperville, IL 60563	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Medical				
4.7	Edwards Elmhurst	Last 4 digits of account number	\$139.84			
	Nonpriority Creditor's Name 1804 N Naper Blvd Naperville, IL 60563	When was the debt incurred?				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	□ Unliquidated				
	Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Medical				

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Debt	or 2 Catherine A Allen	Case number (if know)				
4.8	Farm & Fleet	Last 4 digits of account number 4777	\$2,200.65			
	Nonpriority Creditor's Name P.O. Box 960061 Orlando, FL 32896-0061	When was the debt incurred?				
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	■ Other Specify Credit Card				
4.9	Home Depot	Last 4 digits of account number 5541	\$2,993.28			
	Nonpriority Creditor's Name P.O. Box 182676 Columbus, OH 43218-2676	When was the debt incurred?				
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify				
4.1	Kinetic Health	Last 4 digits of account number	\$234.01			
	Nonpriority Creditor's Name 2S631 State Route 59	When was the debt incurred?				
	Warrenville, IL 60555  Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	,				
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Yes	■ Other. Specify Medical				

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Debtor 1 David R Allen Debtor 2 Catherine A Allen Case number (if know) 4.1 **Kinetic Health** \$303.45 Last 4 digits of account number Nonpriority Creditor's Name 2S631 State Route 59 When was the debt incurred? Warrenville, IL 60555 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Medical 4.1 **Kohls** 8470 \$3,716.24 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 2983 When was the debt incurred? Milwaukee, WI 53201-2983 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 **Northwestern Medicine** \$390.43 3 Last 4 digits of account number Nonpriority Creditor's Name 25 N Winfield Rd When was the debt incurred? Winfield, IL 60190 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical ☐ Yes

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	David R Allen Catherine A Allen		Case number (if know)	
4.1 4	Northwestern Medicine	Last 4 digits of account num	nber	\$3,717.21
	Nonpriority Creditor's Name 25 N Winfield Rd Winfield, IL 60190	When was the debt incurred	?	-
	Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the c	laim is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unse	cured claim:	
	$\square$ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a	separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	·	sharing plans, and other similar debts	
	Yes	Other. Specify Medica	I	-
Part 3:	List Others to Be Notified About a D	Pebt That You Already Listed		
is tryin have n	ng to collect from you for a debt you owe to	someone else, list the original credi hat you listed in Parts 1 or 2, list the	that you already listed in Parts 1 or 2. For examp tor in Parts 1 or 2, then list the collection agenc additional creditors here. If you do not have ad	y here. Similarly, if you
	nd Address	On which entry in Part 1 or Part 2 di		
_	ational Services x 469046	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Cla	
	dido, CA 92046-9046		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number	2200	
	nd Address	On which entry in Part 1 or Part 2 di	· ·	
	I Management Services, LP 2 South Ogden Street	Line 4.5 of (Check one):	Part 1: Creditors with Priority Unsecured Cla	
	o, NY 14206-0604		■ Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number	8011	
	nd Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?	
	y SPV, LLC ox 520	Line 4.8 of (Check one):	Part 1: Creditors with Priority Unsecured Cla	
	ox 520 Ia, NY 10595		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2 die	d you list the original creditor?	
	rvices Limited Partnership	Line 4.9 of (Check one):	Part 1: Creditors with Priority Unsecured Cla	
	ox 3855 on, TX 77253		Part 2: Creditors with Nonpriority Unsecured	Claims
1100000	511, 17, 17, 200	Last 4 digits of account number	1439	
	nd Address	On which entry in Part 1 or Part 2 di	d you list the original creditor?	
	essive Financial Services	Line <b>4.12</b> of ( <i>Check one</i> ):	Part 1: Creditors with Priority Unsecured Cla	
Blg. 8	Vest Fairmount Dr		Part 2: Creditors with Nonpriority Unsecured	Claims
_	e, AZ 85282			
		Last 4 digits of account number	8006	
	nd Address	On which entry in Part 1 or Part 2 di	<i>'</i>	
	Collection Bureau, Inc.	Line 4.4 of (Check one):	Part 1: Creditors with Priority Unsecured Cla	
Suite 2			Part 2: Creditors with Nonpriority Unsecured	Claims
Toledo	o, OH 43614	Last 4 digits of account number	2045	

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

<sup>6.</sup> Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 David R Allen
Debtor 2 Catherine A Allen

Case number (if know)

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total				
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	\$ Total Claim
Total claims				 0.00
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 85,699.88
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 85,699.88

		17(7(3)))))				
Fill in this information to identify your case:						
Debtor 1	David R Allen					
	First Name	Middle Name	Last Name			
Debtor 2	Catherine A Aller	1				
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS			
Case number						
(if known)						

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldio	211 0000	
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.4					
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	Oity		State	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

		Docume	nt Page 36 of	62
Fill in this info	rmation to identify your o	case:		
Debtor 1	David R Allen			
	First Name	Middle Name	Last Name	
Debtor 2	Catherine A Allen			
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing
	orm 106H e H: Your Code	ahtore		42/45
Scriedui	e n. Your Cou	aproi 2		12/15
	case number (if known).			is a codebtor.
	he last 8 years, have you alifornia, Idaho, Louisiana,			? (Community property states and territories include gton, and Wisconsin.)
■ No. Go	to line 3. I your spouse, former spou	se, or legal equivalent live	with you at the time?	
in line 2 a	gain as a codebtor only if D), Schedule E/F (Official	that person is a guarant	or or cosigner. Make su	f your spouse is filing with you. List the person shown ure you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fill
	mn 1: Your codebtor Number, Street, City, State and ZIF	<sup>2</sup> Code		Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.1 <b>Kyl</b> e	e Allen			■ Schedule D, line □ Schedule E/F, line □ Schedule G State Farm Bank

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Fill	in this information to identify	your case:					
Del	btor 1 David F	R Allen					
	btor 2 Cathering Cathering	ine A Allen					
Uni	ited States Bankruptcy Court	for the: NORTHERN DISTRI	CT OF ILLINOIS				
	se number nown)		-				chapter
0	fficial Form 106I				MM / DD/ Y	YYY	
S	chedule I: Your	Income					12/15
spo atta Par	use. If you are separated an ch a separate sheet to this to the characters are the characters.  Describe Employ	If you are married and not fili id your spouse is not filing w form. On the top of any additi ment	ith you, do not includ	de information	n about your spo	ouse. If more space is a	needed,
1.	Fill in your employment information.		Debtor 1		Debtor 2	or non-filing spouse	
	If you have more than one j attach a separate page with information about additional	Employment status	<ul><li>□ Employed</li><li>■ Not employed</li></ul>		■ Emplo		
	employers.	Occupation			Custon	ner Service	
	Include part-time, seasonal, self-employed work.	or <b>Employer's name</b>			BFC		
	Occupation may include stu or homemaker, if it applies.	dent Employer's address			1051 No Batavia	orth Kirk Road , IL	
		How long employed t	here?				
Pai	Give Details Abou	ut Monthly Income					
	mate monthly income as of use unless you are separated	the date you file this form. If	you have nothing to re	eport for any I	ine, write \$0 in the	space. Include your nor	n-filing
	ou or your non-filing spouse ha e space, attach a separate sh	ave more than one employer, co	ombine the information	n for all emplo	yers for that perso	n on the lines below. If y	ou need
					For Debtor 1	For Debtor 2 or non-filing spouse	
2.		s, salary, and commissions (both), calculate what the month		2. \$	2,700.00	\$3,672.50	
3.	Estimate and list monthly	overtime pay.		3. +\$	0.00	+\$0.00	
4.	Calculate gross Income	Add line 2 + line 3		4. \$	2 700 00	\$ 3,672,50	

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David R Allen Debtor 1 **Catherine A Allen** Debtor 2 Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 2.700.00 3,672.50 List all payroll deductions: Tax, Medicare, and Social Security deductions 5a. 5a. 0.00 548.17 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 Voluntary contributions for retirement plans 5c. 5c. \$ 0.00 0.00 5d. Required repayments of retirement fund loans 5d. 0.00 \$ 0.00 5e. Insurance 5e. 0.00 1.057.33 5f. **Domestic support obligations** 5f. 0.00 0.00 5q. **Union dues** 5q. 0.00 0.00 5h. Other deductions. Specify: 5h.+ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 1,605.50 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. 2,700.00 2,067.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. 8a. \$ 0.00 0.00 8h Interest and dividends 8h \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. Specify: 0.00 0.00 8g. 8g. Pension or retirement income \$ 0.00 \$ 0.00 Other monthly income. Specify: 8h.+ \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 0.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ 2.700.00 + \$ 2.067.00 4.767.00 \$ Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 4,767.00 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No.

is an estimate.

Husband is not currently working and is actively seeking employment. The monthly income set forth

П

Yes. Explain:

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	in this informa	ition to identify yo	our occo:							
	III IIIIS IIIIOIIIIa	mon to identity yo	our case.							
Deb	tor 1	David R Alle	n					if this is:		
	tor 2 ouse, if filing)	Catherine A	Allen				Α		ving postpetition chap the following date:	ter
	, 0,	. 0 . ( . 1	. NODTI		010		- N 41	M / DD / \\		
Unite	ed States Bankı	ruptcy Court for the	: NORTH	IERN DISTRICT OF ILLIN			IVI	M / DD / YYYY		
1	e number nown)									
Of	fficial Fo	rm 106J								
Sc	chedule	J: Your	Expen	ises						12/1
info	rmation. If m	and accurate as lore space is ne n). Answer evel	eded, atta	If two married people ar ch another sheet to this t n.	e filing together, bo form. On the top of	oth are ed any addi	quall tion:	y responsible fo al pages, write y	or supplying correct your name and case	
Part		ribe Your House	hold							
1.	Is this a joir  ☐ No. Go to									
	_	es Debtor 2 live	in a senar:	ate household?						
	= 100. <b>200</b>		iii a sopait	ate nousenoid.						
		-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	hold of De	ebtor	· 2.		
2.	Do you have	e dependents?	■ No							
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor			Dependent's age	Does dependent live with you?	
	Do not state								□ No	
	dependents	names.							☐ Yes	
									□ No □ Yes	
									□ No	
									☐ Yes	
									□ No	
3.	Do your exp	oenses include	_	No					☐ Yes	
	expenses o	f people other t	han 🗖	Yes						
	yourself and	d your depende	nts? —	100						
exp	imate your ex		our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp						
the	value of sucl	h assistance an		government assistance it luded it on <i>Schedule I:</i> Y				Your exp	enses	
(UII	ficial Form 10	юі.)						. Jul. 1949		
4.		or home owners nd any rent for th		ses for your residence. In r lot.	nclude first mortgage	4.	\$		1,567.00	
	If not include	led in line 4:								
	4a. Real e	estate taxes				4a.	\$		0.00	
	•	rty, homeowner's				4b.			0.00	
		maintenance, re owner's associat	•	ipkeep expenses		4c. 4d.			100.00	
5.				our residence, such as ho	me equity loans	4a. 5.			0.00 354.85	

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	tor 1 David R Allen	0	.h ('# l	
Den	tor 2 Catherine A Allen	Case num	nber (if known)	
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.		400.00
	6b. Water, sewer, garbage collection	6b.		0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	· -	245.00
-	6d. Other. Specify:	6d.		0.00
7.	Food and housekeeping supplies	7.	·	800.00
8.	Childcare and children's education costs	8. 9.		0.00
9.	Clothing, laundry, and dry cleaning Personal care products and services	9. 10.		75.00
11.	•	10.		0.00 350.00
	Transportation. Include gas, maintenance, bus or train fare.	11.	Ψ	350.00
12.	Do not include car payments.	12.	\$	400.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.		•	
	15a. Life insurance	15a.		122.00
	15b. Health insurance	15b.		0.00
	15c. Vehicle insurance	15c.	*	175.00
40	15d. Other insurance. Specify:	15d.	\$	0.00
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	•	0.00
17	Installment or lease payments:		Ψ	0.00
17.	17a. Car payments for Vehicle 1	17a.	\$	0.00
	17b. Car payments for Vehicle 2	17b.	*	0.00
	17c. Other. Specify:	17c.		0.00
	17d. Other. Specify:	17d.		0.00
18.	Your payments of alimony, maintenance, and support that you did not report a	as	·	
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I)	). 18.		0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
00	Specify:	19.		
20.	Other real property expenses not included in lines 4 or 5 of this form or on Sci 20a. Mortgages on other property	nedule I: Yo 20a.		0.00
	20b. Real estate taxes	20a. 20b.	·	0.00
	20c. Property, homeowner's, or renter's insurance	20b. 20c.	·	0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	·	0.00
	20e. Homeowner's association or condominium dues	20a. 20e.	·	0.00
21	Other: Specify: Vehicle Maintenance		+\$	100.00
۷	vernicle maintenance		Γ	100.00
22.	Calculate your monthly expenses			
	22a. Add lines 4 through 21.		\$	4,688.85
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,688.85
23	Calculate your monthly net income.			
_0.	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,767.00
	23b. Copy your monthly expenses from line 22c above.	23b.	·	4,688.85
	23c. Subtract your monthly expenses from your monthly income.			70.45
	The result is your monthly net income.	23c.	\$	78.15
24.	For example, do you expect to finish paying for your car loan within the year or do you expect your modification to the terms of your mortgage?  No.			ease or decrease because of a
	Yes. Explain here:			

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EUL in dita	deferment on to blood to				
FIII IN this	s information to identify you	ur case:			
Debtor 1	David R Allen				
Dahtan 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	Catherine A All	en Middle Name	Last Name		
	-				
United Sta	ates Bankruptcy Court for the	: NORTHERN DISTRICT	F OF ILLINOIS		
Case num	ber				
(if known)				☐ Check if t	this is an
				amended	J filing
O.(;; . 1	E 400D				
	Form 106Dec				
Decla	aration About	an Individual	Debtor's Sch	edules	12/15
lf two mari	ried people are filing togetl	ner, both are equally response	onsible for supplying correct	information.	
You must f	file this form whenever you	ı file bankruptcy schedule	s or amended schedules. Ma	king a false statement, concealing p	property, or
obtaining i	money or property by fraud	d in connection with a ban		nes up to \$250,000, or imprisonment	
years, or b	ooth. 18 U.S.C. §§ 152, 1341	, 1519, and 3571.			
	Sign Below				
Did y	ou pay or agree to pay sor	neone who is NOT an atto	rney to help you fill out bank	ruptcy forms?	
	No				
	Yes. Name of person			Attach Bankruptcy Petition Prep	arer's Notice,
				Declaration, and Signature (Office	cial Form 119)
Under	r penalty of perjury, I decla	re that I have read the sun	nmary and schedules filed wi	th this declaration and	
that th	hey are true and correct.		•		
Y /s	s/ David R Allen		X /s/ Catherine A	A Allon	
	S/ David R Allen David R Allen		Catherine A A		
_	Signature of Debtor 1		Signature of Deb		
	-		-		
D	October 13, 2017		Date Octobe	r 13, 2017	

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Filli	n this inforr	nation to identify you	case:			
Deb	tor 1	David R Allen				
	_	First Name	Middle Name	Last Name		
Deb (Spou	tor 2 se if, filing)	Catherine A Alle	Middle Name	Last Name		
		alamantara Caramt for the ar				
Unit	ed States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	JF ILLINOIS		
Case (if kno	e number _				_	Check if this is an mended filing
Sta		of Financial		duals Filing for B		4/16
nfor num	mation. If moer (if know	ore space is needed, n). Answer every ques	attach a separate sheet to stion.	this form. On the top of any	equally responsible for sup y additional pages, write you	
Part	1: Give D	etails About Your Ma	rital Status and Where You	ı Lived Before		
1.	What is you	r current marital statu	s?			
	<ul><li>■ Married</li><li>□ Not mai</li></ul>	ried				
2.	During the I	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do n	ot include where you live now	ı.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Part	2 Evolui	n the Sources of You	r Incomo			
ган	2 Ехріаі	in the Sources of Tou	i ilicolile			
	Fill in the tota	al amount of income you	received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No					
	Yes. Fil	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$0.00	■ Wages, commissions, bonuses, tips	\$24,156.00

Official Form 107

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Debtor 1 David R A  Catherine			Case number (if known)				
		Dahtan 4		Dahtan 0			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of incor Check all that app			
For last calendar year (January 1 to Decemb		■ Wages, commissions, bonuses, tips	\$76,785.00	■ Wages, commi	ssions, <b>\$45,965.00</b>		
		☐ Operating a business		Operating a bu	siness		
For the calendar year (January 1 to Decemb		■ Wages, commissions, bonuses, tips	\$74,966.00	■ Wages, commi	ssions, <b>\$44,963.00</b>		
		☐ Operating a business		☐ Operating a bu	siness		
winnings. If you are	e filing a joint cas	se and you have income that	you received together, list it c	only once under Debt			
		Debtor 1		Debtor 2			
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of incor Describe below.	ne Gross income (before deductions and exclusions)		
From January 1 of cu the date you filed for		Unemployment	\$8,097.00				
<del>,</del>		Made Before You Filed for					
☐ No. <b>Neithe</b>	r Debtor 1 nor D	's debts primarily consume bebtor 2 has primarily cons personal, family, or househo	umer debts. Consumer debt	s are defined in 11 U	.S.C. § 101(8) as "incurred by an		
9	•		id you pay any creditor a tota	I of \$6,425* or more?	?		
	o. Go to line 7						
□ <sub>Ye</sub> * Subj	paid that cre not include	editor. Do not include payme payments to an attorney for t	nts for domestic support oblig	ations, such as child	ents and the total amount you support and alimony. Also, do djustment.		
		r both have primarily consi	umer debts. id you pay any creditor a tota	I of \$600 or more?			
■ No	o. Go to line 7						
□ <sub>Y€</sub>	include pay		id a total of \$600 or more and obligations, such as child supp		u paid that creditor. Do not o, do not include payments to an		
Creditor's Name	and Address	Dates of payme	ent Total amount paid	Amount you still owe	Nas this payment for		

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Debtor 2 Catherine A Allen Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address:

Debtor 1

David R Allen

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Del	otor 2 Catherine A Allen			Case number	(if known)	
14.	Within 2 years before you filed for band  ■ No □ Yes. Fill in the details for each gift or			ns with a tota	I value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co.	total	Describe what you contributed		Dates you contributed	Value
Pai	tt 6: List Certain Losses					
15.	Within 1 year before you filed for banks or gambling?	ruptcy or	since you filed for bankruptcy, did y	ou lose anyt	hing because of the	ft, fire, other disaster
	■ No □ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the log the amount that insurance has paid. Lance claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Pai	t 7: List Certain Payments or Transfe	ers				
	Include any attorneys, bankruptcy petition  No Yes. Fill in the details.  Person Who Was Paid Address Email or website address		s, or credit counseling agencies for ser  Description and value of any propertransferred	·	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not Springer Brown, LLC 300 South County Farm Road Suite I Wheaton, IL 60187	You	\$2,000 retainer; \$335 filing fee		10/1/17	\$2,335.00
17.	promised to help you deal with your cr Do not include any payment or transfer th  No Yes. Fill in the details.	editors o	r to make payments to your creditors ed on line 16.	s?		
	Person Who Was Paid Address		Description and value of any proper transferred	erty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of you include both outright transfers and transfer include gifts and transfers that you have a second with the work of th	our busin ers made a	ess or financial affairs? as security (such as the granting of a se			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					

David R Allen

Debtor 1

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Debtor 1 David R Allen
Debtor 2 Catherine A Allen

Case number (if known)

19.	beneficiary? (These are often called asset-prote		erty to a self-sett	led trust or similar device o	of which you are a
	☐ Yes. Fill in the details.				
	Name of trust	Description and value of	the property tra	nsferred	Date Transfer was made
Par	tt 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit Boxes	, and Storage Ur	nits	
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	other financial accounts; cer	tificates of depo		, ,
	Yes. Fill in the details.				
		Last 4 digits of Type instru	of account or ment	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 years, or other valuables?	ar before you filed for bankru	ıptcy, any safe d	eposit box or other deposi	tory for securities,
	No Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to Address (Number, Street, City State and ZIP Code)		e the contents	Do you still have it?
22.	Have you stored property in a storage unit or	·	within 1 year bef	ore you filed for bankrupto	y?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had acc to it? Address (Number, Street, City State and ZIP Code)		e the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else			
23.	Do you hold or control any property that some for someone.	eone else owns? Include any	property you bo	orrowed from, are storing f	or, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and Code)		e the property	Value
Par	t 10: Give Details About Environmental Inform	mation			
	the purpose of Part 10, the following definition				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface water	groundwater, o		
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	as defined under any environ		ther you now own, operate	, or utilize it or used
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic subhazardous material, pollutant, contaminant, or similar term.					substance,

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 David R Allen
Debtor 2 Catherine A Allen

Case number (if known)

24.	Has any governmental unit notified you that yo	ou may be liable or potentially liabl	le unde	r or in violation of an environmer	ntal law?			
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	_	Environmental law, if you now it	Date of notice			
25.	Have you notified any governmental unit of any	y release of hazardous material?						
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)	_	Environmental law, if you snow it	Date of notice			
26.	Have you been a party in any judicial or admini	istrative proceeding under any en	vironme	ental law? Include settlements ar	nd orders.			
	■ No □ Yes. Fill in the details.							
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Natu	re of the case	Status of the case			
Par	11: Give Details About Your Business or Con	nnections to Any Business						
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have a	any of th	he following connections to any	business?			
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
	☐ A partner in a partnership							
	☐ An officer, director, or managing execu	tive of a corporation						
	☐ An owner of at least 5% of the voting o	r equity securities of a corporation	n					
	■ No. None of the above applies. Go to Part	12.						
	Yes. Check all that apply above and fill in	the details below for each busines	ss.					
	Business Name De Address	escribe the nature of the business		Employer Identification number Do not include Social Security n	umbar ar ITIN			
		ame of accountant or bookkeeper		Dates business existed	umber of frint.			
28.	Within 2 years before you filed for bankruptcy, institutions, creditors, or other parties.	did you give a financial statement	t to any	one about your business? Includ	le all financial			
	■ No □ Yes. Fill in the details below.							
	Name Da Address (Number, Street, City, State and ZIP Code)	ate Issued						

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Debtor 1 David R Allen Case number (if known)

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Case number (if known)

Debioi i	Daviu K Alleli		
Debtor 2	Catherine A Allen		Case number (if known)
Part 12:	Sign Below		
I have rea	d the answers on this <i>Statement</i>	of Financial Affairs ar	nd any attachments, and I declare under penalty of perjury that the answers
are true a	nd correct. I understand that mal	king a false statement,	, concealing property, or obtaining money or property by fraud in connection
	kruptcy case can result in fines §§ 152, 1341, 1519, and 3571.	up to \$250,000, or imp	prisonment for up to 20 years, or both.
10 0.5.0.	93 132, 1341, 1319, and 3371.		
/s/ David	l R Allen	/s/ Ca	therine A Allen
David R	Allen	Cathe	erine A Allen
Signatur	e of Debtor 1	Signat	ture of Debtor 2
Date O	ctober 13, 2017	Date	October 13, 2017
Did you a	tach additional pages to Your Si	tatement of Financial	Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No			
☐ Yes			
Did vou p	av or agree to pay someone who	is not an attorney to l	nelp you fill out bankruptcy forms?
No.	.,		and the second s

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this infor	mation to identify your	case:			
Debtor 1	David R Allen				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Catherine A Allen First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	NORTHERN DIS	FRICT OF ILLINOIS		
Case number (if known)					Check if this is an amended filing
Official Fo		n for Indiv	riduals Filing Under C	hapter 7	12/15
you have lease You must file the whicher on the lift two married paign as the second sign as the write years.	ever is earlier, unless the form eople are filing together nd date the form. and accurate as possibyour name and case nun	ur property, or and the lease has no ithin 30 days after e court extends the in a joint case, bother. If more space is aber (if known).		opies to the credito	rs and lessors you list
			: Creditors Who Have Claims Secured b	by Property (Official	l Form 106D), fill in the
	reditor and the property th	nat is collateral	What do you intend to do with the prosecures a debt?		d you claim the property exempt on Schedule C?
Creditor's ,	JP Morgan Chase Bar	ık NA	<ul><li>☐ Surrender the property.</li><li>☐ Retain the property and redeem it.</li></ul>		No
Description of property securing debt	60555 DuPage Co	·	<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	<b>•</b>	Yes
Creditor's <b>§</b>	State Farm Bank		☐ Surrender the property. ☐ Retain the property and redeem it.	_	No
Description of property securing debt	miles		<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	<b>•</b>	Yes
Creditor's \ \ name:	Wells Fargo		☐ Surrender the property. ☐ Retain the property and redeem it.	_	No
Description of property	f 2S271 Route 59 Wa 60555 DuPage Co		<ul><li>■ Retain the property and enter into a Reaffirmation Agreement.</li><li>□ Retain the property and [explain]:</li></ul>	•	Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 David R Allen Catherine A Allen	Case number (if known)
securing debt:	
Part 2: List Your Unexpired Personal Property	29289
or any unexpired personal property lease that you the information below. Do not list real estate lea	u listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill ses. Unexpired leases are leases that are still in effect; the lease period has not yet ended. ease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).
Describe your unexpired personal property lease	Will the lease be assumed?
Lessor's name:	□ No
Description of leased	_ 110
Property:	☐ Yes
Lessor's name:	□ No
Description of leased	<u>_</u>
Property:	☐ Yes
Lessor's name:	□ No
Description of leased	
Property:	☐ Yes
Lessor's name:	□ No
Description of leased	
Property:	☐ Yes
Lessor's name:	□ No
Description of leased	<b>-</b>
Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	
roperty.	☐ Yes
Lessor's name:	□ No
Description of leased	
Property:	☐ Yes
Part 3: Sign Below	
Inder penalty of perjury, I declare that I have indic roperty that is subject to an unexpired lease.	ated my intention about any property of my estate that secures a debt and any personal
X /s/ David R Allen	X /s/ Catherine A Allen
David R Allen	Catherine A Allen
Signature of Debtor 1	Signature of Debtor 2

Date

Date

October 13, 2017

October 13, 2017

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-30722 Doc 1 Filed 10/13/17 Entered 10/13/17 12:14:18 Desc Main Document Page 55 of 62

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court**Northern District of Illinois

In r	David R Allen  Catherine A Allen		Case No.	
	Gallerine A Alleri	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPENS			` ,
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of contemplation.	of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
				2,000.00
	Prior to the filing of this statement I have received		\$	2,000.00
	Balance Due		\$	0.00
2.	\$335.00 of the filing fee has been paid.			
3.	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4.	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5.	■ I have not agreed to share the above-disclosed compens	sation with any other person	unless they are mem	bers and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names			
6.	In return for the above-disclosed fee, I have agreed to rende	er legal service for all aspect	s of the bankruptcy c	ease, including:
	<ul><li>a. Analysis of the debtor's financial situation, and renderin</li><li>b. Preparation and filing of any petition, schedules, statem</li><li>c. Representation of the debtor at the meeting of creditors</li><li>d. [Other provisions as needed]</li></ul>	ent of affairs and plan which	may be required;	
7.	By agreement with the debtor(s), the above-disclosed fee de	oes not include the following	g service:	
	-	CERTIFICATION		
this	I certify that the foregoing is a complete statement of any a bankruptcy proceeding.	greement or arrangement for	payment to me for r	epresentation of the debtor(s) in
	October 13, 2017	/s/ Joshua D. Gre	ene	
_	Date	Joshua D. Green		
		Signature of Attorne Springer Brown,		
		300 S. County Fa	rm Road	
		Suite I Wheaton, IL 6018	37	
		630-510-0000 Fa	x: 630-510-0004	
		www.springerbro	own.com	
		ivame oj iaw jirm		

### **Advance Payment Retainer Agreement**

NEW WILLIES YOU

I, Day of Catherne All the undersigned, hereinafter referred to as "Client", agree to employ Springer Brown, LLC., hereinafter referred to as "Attorney", to render legal services in connection with filing a Chapter7 bankruptcy for me, and hereby empower and authorize Attorney to do all things, in their sole discretion, reasonably necessary to bring the matter to a successful conclusion. Client acknowledges that the following advance payment retainer agreement has been fully explained, and Client agrees to pay said fees and costs in consideration of legal services rendered or to be rendered.

Client agrees to pay Attorney a fee of \$ 2,000 . 10 for services set forth below. In addition, Client agrees to pay all costs, including the filing fee for the bankruptcy \$335.00.

This retainer agreement is an advance payment retainer agreement. The funds Client has agreed to pay Attorney shall be deposited in the Springer Brown, LLC General Operating Account and ownership of said hands shall pass to Springer Brown, LLC immediately upon payment.

As our client, it is your option to have your money placed into a security retainer. The choice of the type of retainer to be used is yours alone.

The special purpose for this advance payment retainer is to allow Client to retain Attorney to represent him against creditors. Client understands that it is advantageous to treat his retainer as an advance payment retainer in that it protects the funds paid to Attorney from the claims of his creditors. It this retainer were treated as a security retainer, said funds would remain the property of Client and therefore subject to the claims of the Client's creditors.

It is understood that the above referenced flat fee is payment for services rendered and services to be performed. The services include: review of financial status; review of various documents related to debts and obligations; counseling as to various types of bankruptcy chapters; effect of bankruptcy on future ability to obtain new credit; effect of reaffirmation, redemption, avoiding, liens and surrendering property; specific advice regarding how to avoid bankruptcy and alternatives to bankruptcy; complete drafting of all required bankruptcy documents; revision and redraft of final bankruptcy documents; attending creditors' meeting, and closing file.

Client agrees that additional attorney's fees will be due should additional representation become necessary, including, but not limited to any 2004l examination, any adversary proceedings, objections to discharge, or any other action, hearing or representation that is not specified in the preceding paragraph of this agreement. Said additional representation shall be covered by a separate legal services agreement and will require an additional retainer.

The Client agrees that should be decide not to file bankruptcy or decide not to continue using Attorney's services, Attorney may charge against any retainer paid the amount of \$350.00 per hour for all services rendered to date, plus actual costs incurred.

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Client agrees to cooperate in the preparation of the bankruptcy case, to appear for the creditors' meeting, depositions and court appearances and to comply with all reasonable requests made in preparation of this bankruptcy case. Failure to cooperate may result in Court-imposed sanctions and Attorney's withdrawal from the case.

Client understands that he shall receive copies of all documents related to his file. Client should retain those documents as his copy of his file. Should Client require additional copies of the Attorney's file the Client understands that he will be charged for those copies.

Client understands that his file shall be kept no more than five years. Should Client require copies of any documents or the return of original documents provided to Attorney he must request those copies in writing before the expiration of that five-year period.

It is agreed that upon the event of any default or breach of any kind under this agreement by Client, Attorney reserves the right to withdraw as counsel of record for Client. It is further agreed that Client shall not have any recourse or claim against Attorney for damages following the withdrawal of Attorney as Client's counsel.

In some cases it may be necessary to hire an attorney outside Attorney's firm. This attorney will be paid out of the retainer paid to Attorney. Client expressly consents to the hiring of an outside attorney to cover court dates as needed.

Client understands that it is the Client's responsibility to provide Attorney with a complete and accurate list of creditors and other information requested on Attorney's Debt Listing Sheet and Questionnaire. The Client further understands that any debts not listed in his bankruptcy schedules may not be discharged. If Client fails to provide Attorney with all information necessary to prepare the necessary documents and said failure necessitates the amending of the schedules or Statement of Financial Affairs, Client agrees to pay an additional \$100.00 to cover the fees and costs of said amendment.

The fees charged in connection with this bankruptcy and for bankruptcy issues only. They do not included resolution of any matters involving credit information.

This constitutes the entire agreement between the Attorney and Clients regarding attorneys' fees and/or services provided in the engagement, the parties agree to resolve that dispute through mediation, followed by arbitration before any suit is filed.

Attorney is a debt relief agency and helps people file for relief under the Bankruptcy Code.

#### Special Financial Management Course Notice

Client MUST provide Attorney with a copy of Client's Certificate of Completion of Financial Management Course. If Client fails to ensure that Attorney has received and filed the required Certificate of Completion of Financial Management Course, the Client shall be responsible for payment of the case reopening fee and additional Attorney's fees of \$600.00 for filing a motion to reopen the case and file said certificate. Attorney is under no obligation to file any motion to reopen Client's case until the above referenced fees and costs are paid.

Dan Adu Client

Obther a allar Client

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By Client's signature below, Client acknowledges understanding the terms of this agreement and agrees to abide by its provisions. Client has received a copy of this agreement for his records no later than five business days after the first date on which the Attorney provided any bankruptcy assistance services to client.

 $(\varphi_{i}^{(k)}(z)) \otimes_{\mathbb{R}^{n}} (z) \otimes_{\mathbb$ 

Dated:

Client

Client

lather a aller

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B2030 (Form 2030) (12/15)

# United States Bankruptcy Court Northern District of Illinois

T	David R Allen		C N		
In r	Catherine A Allen	Debtor(s)	Case No. Chapter	7	
		, ,	·	The state of the s	
	DISCLOSURE OF COMPENSAT	TON OF ATTO	RNEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), i compensation paid to me within one year before the filing of the be rendered on behalf of the debtor(s) in contemplation of or in	petition in bankruptcy.	, or agreed to be paid	to me, for services rendered	d or to
	For legal services, I have agreed to accept		\$ <u></u>	2,000.00	
	Prior to the filing of this statement I have received		\$ <u></u>	2,000.00	
	Balance Due		\$	0.00	
2.	\$ 335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:		•		
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensation	n with any other person	unless they are mem	bers and associates of my la	aw firm.
	☐ I have agreed to share the above-disclosed compensation we copy of the agreement, together with a list of the names of the same of the copy of the agreement.				m. A
6.	In return for the above-disclosed fee, I have agreed to render lea	gal service for all aspec	ts of the bankruptcy	ease, including:	
	<ul> <li>a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;</li> <li>b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;</li> <li>c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;</li> <li>d. [Other provisions as needed]</li> </ul>				<b>v</b> ;
7.	By agreement with the debtor(s), the above-disclosed fee does r	not include the followin	g service:		
	CER	RTIFICATION //	<b>/</b>		
this	I certify that the foregoing is a complete statement of any agree bankruptcy proceeding.	ment or arrangement fo	r payment to me for r	epresentation of the debtore	(s) in
-	10/5/17	. /			
	Date	Joshua D. Green Signature of Attorn			
		Springer Brown,	LLC		
		300 S. County Fa	arm Road		
		Wheaton, IL 601		•	
		630-510-0000 Fi	ax: 630-510-0004		
		Name of law firm	OWII.COM	Iv	

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### **United States Bankruptcy Court** Northern District of Illinois

In re	David R Allen Catherine A Allen		Case No.	
		Debtor(s)	Chapter	7
	VER	RIFICATION OF CREDITOR M.	ATRIX	
		Number of Creditors:		
The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the (our) knowledge.				correct to the best of my
Date:	October 13, 2017	/s/ David R Allen  David R Allen		
		Signature of Debtor		
Date:	October 13, 2017	/s/ Catherine A Allen		
		Catherine A Allen		
		Signature of Debtor		

Advanced Dermatology 1049 E. Wilson St. #190 Batavia, IL 60510

Advocate Medical Cardiology 1901 S. Meyers Rd Suite 350 Villa Park, IL 60181

ARS National Services PO Box 469046 Escondido, CA 92046-9046

Capital Management Services, LP 698 1/2 South Ogden Street Buffalo, NY 14206-0604

Cavalry SPV, LLC P.O. Box 520 Valhalla, NY 10595

Chase Visa P.O. 15123 Wilmington, DE 19850

Discover P.O. Box 6103 Carol Stream, IL 60197-6103

Edwards Elmhurst 1804 N Naper Blvd Naperville, IL 60563

Farm & Fleet P.O. Box 960061 Orlando, FL 32896-0061

GC Services Limited Partnership P.O. Box 3855 Houston, TX 77253

Home Depot P.O. Box 182676 Columbus, OH 43218-2676 JP Morgan Chase Bank NA 120 S. LaSalle St. Chicago, IL 60603

Kinetic Health 2S631 State Route 59 Warrenville, IL 60555

Kohls
P.O. Box 2983
Milwaukee, WI 53201-2983

Kyle Allen

Northwestern Medicine 25 N Winfield Rd Winfield, IL 60190

Progressive Financial Services 1919 West Fairmount Dr Blg. 8 Tempe, AZ 85282

State Farm Bank 2702 Ireland Grove Road Bloomington, IL 61709

United Collection Bureau, Inc. 5620 Sothy ck Blvd Suite 206 Toledo, OH 43614

Wells Fargo PO Box 14411 Des Moines, IA 50306